CHANGES IN THE ARMY NURSE CORPS

CHANGES IN THE ARMY NURSE CORPS RECORDED IN THE SURGEON-GENERAL'S OFFICE FOR THE MONTH ENDING OCTOBER 13, 1903.

ASHEN, MRS. SARAH C., formerly on duty at the First Reserve Hospital, Manila, P. I., arrived in the United States September 17, discharged.

Bamber, Isabella M., graduate of New York City Training-School, Blackwell's Island, appointed and assigned to duty at General Hospital, Presidio, San Francisco.

Bauer, Mrs. Christiana M., transferred from the General Hospital, Presidio, San Francisco, to duty at Fort Bayard, N. M.

Cashman, Mary L., transferred October 1 from the General Hospital, Presidio, San Francisco, to duty on transport Sherman en route to the Philippines for duty in that division.

Daly, Annie A., transferred from temporary duty at First Reserve Hospital, Manila, to regular duty at the Base Hospital, Iloilo, P. I.

Hall, Mrs. Mary B., transferred from the First Reserve Hospital, Manila, P. I., to duty on transport en route to the United States. Arrived in San Francisco October 12 and reported for instructions.

Hasemeyer, Augusta D., recently on duty at Base Hospital, Iloilo, P. I., discharged in Philippines to be married. Was married on August 5 to Mr. John W. Lattimore, constabulary officer.

Innes, May B., graduate of the Elizabeth General Hospital, Elizabeth, N. J., appointed and assigned to duty at the General Hospital, Presidio, San Francisco.

Kennedy, Emma L., recently on sick report at General Hospital, Presidio, San Francisco, discharged.

Lewis, Winifred E., formerly on duty at the General Hospital, Fort Bayard, N. M., discharged.

McIntosh, Margaret, formerly on duty at the General Hospital, Presidio, San Francisco, discharged.

Mann, Mrs. Emilyn P., formerly on duty at the Base Hospital, Iloilo, P. I., transferred to duty on the Sumner en route to the United States via the Suez Canal.

Marker, Ida Maude, transferred from temporary duty at the First Reserve Hospital, Manila, to regular duty at the Base Hospital, Iloilo, P. I.

Mason, Edith A., on leave when transport of October 1 sailed; orders revoked until sailing of the next transport to the Philippine Islands.

Meuser, Gretta Bella, transferred October 1 from the General Hospital, Presidio, San Francisco, to duty on Sherman en route to the Philippines for duty in that division.

Mills, Bessie, transferred from temporary duty at the First Reserve Hospital, Manila, to the Base Hospital, Iloilo, P. I.

Pierce, Margaret, graduate of the New York City Training-School, Black-well's Island, appointed and assigned to duty at the General Hospital, Presidio, San Francisco.

Purves, Mary Olive, formerly on duty at the Base Hospital, Iloilo, P. I., transferred to duty on transport en route to the United States. Arrived in San Francisco October 12 and reported for instructions.

Rector, Josephine, arrived in San Francisco September 17, assigned to duty at the General Hospital, Presidio, San Francisco.

Shea, Annie M., transferred from the General Hospital, Presidio, San Francisco, to duty on Sherman en route to the Philippines for duty in that division.

Wills, Edith M., formerly chief nurse at Fort Bayard, N. M., recently arrived in the Philippines, assigned to duty as chief nurse at the Base Hospital, Iloilo.



Some Dangers of the Hot-Water Bottle as Applied to the New-Born.—Dr. Douglas H. Stewart, of New York, has written an article on this subject in the *Medical Record* which is of special interest to nurses. He emphasizes the special danger of burns to infants, and says even after the burn is healing convulsions from this source may cause death.

Intracranial hemorrhage may follow overheating and extensive burning. A child had shown no signs of cerebral trouble until the buttocks and back were burned by a large hot-water bag. The fontanelle began to bulge some thirty-six hours after the burn. A danger most likely to happen when glass bottles are used about the neck is heating of the blood in the carotid arteries. If the temperature of the internal carotids is raised and maintained by heat, these vessels having no branches in the neck, the heated blood is conveyed to the brain and the effect on the medulla and respiratory centre is direct and marked, particularly when heat is applied at the back of the neck at the same time.

A per part healthy new-born child was placed in his crib, a hot-water bag underneath mm, and a bottle filled with hot water each side of his neck. This was the nurse's precaution, as the room was not very warm. She knew how efficient an ice-bag was when applied to the vessels of the neck, and she supposed heat could be utilized in the same manner with good effect. At the end of about a half-hour, on uncovering the child, I was surprised to find it breathing in a most peculiar manner, similar to the Cheyne-Stokes respiration. This soon ceased after picking up the infant, but a few days later I saw the same sort of dyspnæa in an older child; only here it followed a long-continued poulticing of the neck. The rectal temperature was 104.2°. The poultices were discontinued, and all bad symptoms had disappeared at the time of my second visit—i.e., about two hours after the removal of the poultices

One reason that such occurrences are not found frequently is that the rubber hot-bag does not readily fit into the neck, but bottles will roll, and will stay snugly against the skin over the vessels of the neck. In my case, as the bottles formed an arch, their tops being in contact, any question of antero-posterior pressure may be dismissed. As to the temperature, I should say that any degree or amount of contact heat sufficient to keep the temperature in the carotids at 110° or over will certainly produce the disturbances described in about thirty minutes. There should always be a thick folded blanket above every hot bag (not necessarily hot-water bag, for the materials may be shot, sand, towels, etc.), and, for that matter, a thick folded towel under every ice-bag.